



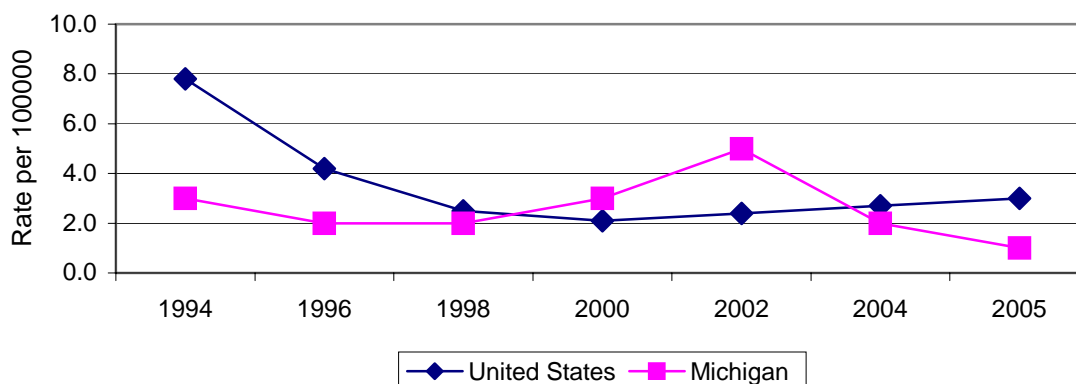
Topic: Sexually Transmitted Disease

36. Syphilis

Primary and secondary (P&S) or infectious syphilis is a bacterial infection predominately spread through sexual contact. It can also be spread from mother to child. Syphilis is relatively difficult to transmit. The social networks at risk for syphilis include individuals who, in the past 12 months: 1) had four or more partners, 2) had unknown or anonymous partners, 3) exchanged money or drugs for sex, and/or 4) used hard drugs like crack, cocaine or heroin. People are infectious for a short period of time, and the incubation period is long, providing opportunity for treatment and prevention. P&S syphilis can be successfully treated with antibiotics.

How are we doing?

**Primary and Secondary Syphilis Rates
Michigan and the United States, 1994-2005**



The total number of reported primary and secondary syphilis cases in Michigan decreased in 2005, following a downward trend that started in the latter half of 2002.

After years of steady increases, Detroit morbidity dropped 53% in 2003, 30% in 2004, and 57.1% in 2005. Numbers of infectious syphilis cases in outstate Michigan have stayed at low levels, with 64 cases in 2003, 66 in 2004, and 27 in 2005. Michigan's goal is to maintain these historically low levels.

How Does Michigan compare with the U.S.?

The rate of primary and secondary syphilis cases in Michigan was 1 per 100,000 population in 2005, which was lower than the national rate of three per 100,000 population. Michigan ranks 35th in the United States in the rate of syphilis cases reported.

How are different populations affected?

The rates of primary and secondary syphilis are more evenly distributed among different age groups than gonorrhea and chlamydia, which primarily affect younger age groups. In 2005, the rates of infectious syphilis were higher among men, reflecting increased transmission in men who have sex with men. Blacks still account for 66% of the syphilis cases; however, there have been increases among White men in the past several years. Given that sexual activity does not vary by race, the increased rate is evidence that once a pathogen is in a community or social network, the likelihood of acquiring that infection



increases significantly. The highest rates of infectious syphilis, in 2005, were in the City of Detroit and Wayne, Grand Traverse, Saginaw, Ingham, Kent, and Oakland Counties.

What is the Department of Community Health doing to improve this indicator?

As part of the National Syphilis Elimination Campaign, collaboration between the City of Detroit, the State of Michigan and local community-based organizations resulted in a model program that targets interventions to individuals most at risk. Michigan currently is at the lowest rate of infection since 1999. This level of effort must continue to keep that rate low.

The MDCH has developed many tools to assist community-based organizations. The most helpful partnerships are with community-based organizations that can reach high-risk communities. The Department collaborates with Partner Counseling and Referral Services (PCRS) staff in providing integrated HIV and syphilis prevention services targeting men who have sex with men (MSM) in Detroit and Oakland County.

Partnerships with various programs have been successful in providing onsite services to high-risk populations. MDCH collaborations have brought STD education and care services to populations who rarely seek medical services and, more importantly, may not otherwise have had access to health care. The rapport between The MDCH and these community-based organizations has reduced the stigma often attached to syphilis interventions and provided opportunities for high risk populations to access services.